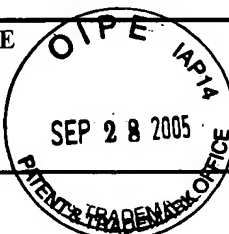


09-30-05

JFW

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10) Applicant(s): Craig Smith, et al.			Docket No. 14374.105	
Application No. 10/774,899	Filing Date 02/09/2004	Examiner Ho, Allen C	Customer No. 022913	Group Art Unit 2882
Invention: MOUNTING SYSTEM FOR AN X-RAY TUBE				



I hereby certify that the following correspondence:

Amendment Transmittal Letter (1 pg, in duplicate); Amendment (25 pgs with 6 sheets of drawings); Certificate of Express Mail Label No. EV680256318US (1 pg); and Postcard

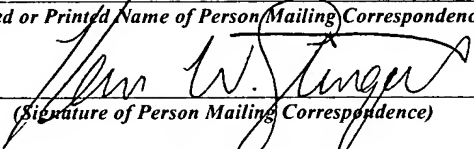
(Identify type of correspondence)

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

September 28, 2005
(Date)

Kevin W. Stinger

(Typed or Printed Name of Person Mailing Correspondence)

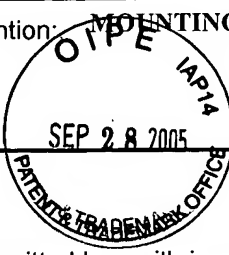
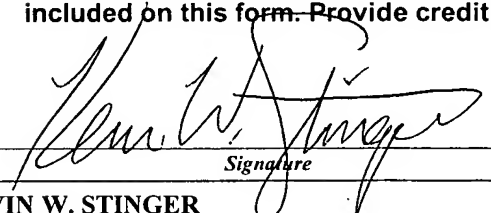


(Signature of Person Mailing Correspondence)

EV680256318US

("Express Mail" Mailing Label Number)

Note: Each paper must have its own certificate of mailing.

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 14374.105	
Applicant(s): Craig Smith, et al.					
Application No. 10/774,899	Filing Date 02/09/2004	Examiner Ho, Allen C	Customer No. 022913	Group Art Unit 2882	Confirmation No. 8761
Invention: HOUSING SYSTEM FOR AN X-RAY TUBE					
 COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	36 -	36 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	6 -	6 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 23-3178 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ Signature			Dated: September 28, 2005		
KEVIN W. STINGER Attorney for Applicant Registration No. 48,959			<div style="border: 1px solid black; padding: 5px;"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> _____ Signature of Person Mailing Correspondence </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> _____ Typed or Printed Name of Person Mailing Correspondence </div>		
CC:					